

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000270670

**Entity Name:** BLUE TASH HEALTH LLC

**Current Principal Place of Business:**

6800 SW 40 STREET  
MIAMI, FL 33155

**Current Mailing Address:**

6800 SW 40 STREET  
MIAMI, FL 33155 US

**FEI Number:** 83-2585585

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VILAR, ROSSANA  
6800 SW 40 STREET  
MIAMI, FL 33155 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** ROSSANA VILAR

02/13/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name VILAR, ROSSANA  
Address 6800 SW 40TH STREET  
City-State-Zip: MIAMI FL 33155

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROSSANA VILAR

MGR

02/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date